MS4 Annual Report Cover Page

MCC form for period ending March 9, 2

This cov	er page must	be completed	by the report	preparer.
Joint rep	ports require	only one cover	r page.	

SPDES ID $N \mid Y \mid R$

Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

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OR

This report is being submitted on behalf of a Single Entity

(Per Part II.E of GP-0-10-002)

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OR

O This is a joint report being submitted on behalf of a coalition.

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

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Cover Page 1 of 2

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 3

Provide SPDES ID of each permitted MS4 included in this report.

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Name of MS4 Town of Southampton		N	YF	2	0	А	4	5	4
Each MS4 must submit an MCC form. Section 1 - MCC Identification Page		•							
Indicate whether this MCC form is being submitted to certify endorsement • An Annual Report for a single MS4 • A Single Entity (Per Part II.E of GP-0-10-002)	t or acc	cept	tance	of:					
O A Joint Report									
Joint reports may be submitted by permittees with legally bi	nding	agr	eeme	ents.					
If Joint Report, enter coalition name:	Ü	Ū							
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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Name of MS4 Town of Southampton	N	Y	R	2	0	A	4	5	4

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for <u>each</u> of the following positions as indicated below:

- 1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
- 2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
- 3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

- Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI	Last Name
A n n a		Throne-Holst
Title		
Town Supervisor		
Address		
1 1 6 Hampton Road	ı 📗	
City		State Zip
S o u t h a m p t o n		N Y 1 1 9 6 8 -
eMail		
athrone-holst@sc	ut	hamptontownny.gov
Phone		County
(6 3 1) 2 8 3 - 6 0 5 5		Suffolk

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

	SPI	DES	ID						
Name of MS4 Town of Southampton	N	Y	R	2	0	A	4	5	4

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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name	MI Last Name
John	LaRosa, P.E.
Title	
A s s i s t a n t T o w n E	n g i n e e r
Address	
1 1 6 H a m p t o n R o a d	
Cia	
City	State Zip
S o u t h a m p t o n	State Zip N Y 1 1 9 6 8 -
S o u t h a m p t o n	N Y 1 1 9 6 8 -
Southampton eMail	N Y 1 1 9 6 8 -

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

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Name of MS4 Town of Southampton	N	Υ	R	2	0	Α	4	5	4

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If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- O Report Preparer

First Name C h r i s t i n e	MI Last Name Fetten, P.E.
Title	
Town Engineer	
Address	
1 1 6 Hampton Road	
City	State Zip
S o u t h a m p t o n	N Y 1 1 9 6 8 -
eMail	
cfetten@southamp	tontownny.gov
Phone	County
(6 3 1) 7 0 2 - 1 7 5 0	Suffolk

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

	SPI	DES	S ID						
Name of MS4 Town of Southampton	N	Y	R	2	0	A	4	5	4

Section 2 - Contact Information

Important Instructions - Please Read

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- 4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
- 5. Report Preparer (Consultants may provide company name in the space provided).

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- O Principal Executive Officer/Chief Elected Official
- O Duly Authorized Representative
- O Local Stormwater Public Contact
- O Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name	MI Last Name
Title	
D & B E n g i n e e r s a n	d Architects
Address	
3 3 0 C r o s s w a y s P a	rk Drive
C'i	
City	State Zip
Woodbury	State Zip N Y 1 1 7 9 7 -
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MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2 0 1 3

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 3

Name of MS4 Town of Southampton	SPDES ID N Y R 2 0 A 4 5 4
Section 4 - Certification Statement	
"I certify under penalty of law that this document and all attachmen direction or supervision in accordance with a system designed to as properly gathered and evaluated the information submitted. Based of persons who manage the system, or those persons directly responsible the information submitted is, the best of my knowledge and belief, aware that there are significant penalties for submitting false information and imprisonment for knowing violations."	sure that qualified personnel on my inquiry of the person or ble for gathering the information, true, accurate, and complete. I am
This form must be signed by either a principal executive officer or authorized representative of that person as described in GP-0-08-00	ranking elected official, or duly 2 Part VI.J.
First Name MI Last Name	
Anna Thro	ne-Holst
Title (Clearly print title of individual signing report)	
Town Supervisor	
Signature	Date / /
Send completed form and any attachments to the DEC Central Office	re at:

MS4 Permit Coordinator Division of Water 4th Floor 625 Broadway Albany, New York 12233-3505

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Water Quality Trends	
The information in this section is being reported (check one):	
 On behalf of an individual MS4 On behalf of a coalition How many MS4s are contributed to this report? 	
1. Has this MS4/Coalition produced any reports documenting water quality trends related to stormwater? If not, answer No and proceed to Minimum Control Measure	
One. O Yes If Yes, choose one of the following	• No
Report(s) attached to the annual report	
O Web Page(s) where report(s) is/are provided below	
Please provide specific address of page where report(s) can be accessed - not home page	
URL	
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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of	a coalition leave SPDES ID blank.												
Name of MSA/Coalition Town of Southampton	SPDES ID												
Name of MS4/Coalition 10wn of Southampton	N Y R 2 0 A 4 5 4												
Minimum Control Measure 1. Public Ed	lucation and Outreach												
The information in this section is being reported (check one):													
On behalf of an individual MS4On behalf of a coalition													
How many MS4s contributed to this report?													
1. Targeted Public Education and Outreach Best Managem	ent Practices												
Check all topics that were included in Education and Outreach d	luring this reporting period:												
● Construction Sites	Pesticide and Fertilizer Application												
● General Stormwater Management Information	Pet Waste Management												
● Household Hazardous Waste Disposal	Recycling												
● Illicit Discharge Detection and Elimination	O Riparian Corridor Protection/Restoration												
O Infrastructure Maintenance	■ Trash Management												
Smart Growth	 Vehicle Washing 												
Storm Drain Marking	Water Conservation												
Green Infrastructure/Better Site Design/Low Impact Development	• Wetland Protection												
Other:	○ None												
O i 1 R e c y c 1 i n g ; S e p t i c T a Other	n k ; B o a t M a i n t												
2. Specific audiences targeted during this reporting period:													
Public Employees Contractors													
Residential Developers													
Businesses • General Public													
Restaurants O Industries													
Other: O Agricultural													
C i v i c G r o u p s Other													

MCM 1 Page 1 of 4

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of MS4/Coalition Town of Southampton	N	Y	R	2	0	A	4	5	4

4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town Public Education and Outreach program will be tailored to describe topics related to the impacts of storm water discharges on local water bodies, pollutants of concern and their sources, and the steps that can be taken to reduce pollutants in storm water runoff and non-storm water discharges. The Town's program will make special note of the discharge of pathogen and nitrogen to the local impaired waters listed in Appendix 2 of the General Permit.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has chosen to evaluate the number of direct mailings related to storm water pollution prevention as an indicator for measuring the overall effectiveness of the Town's compliance with the Public Education and Outreach program requirements. There were over 6,500 pieces of storm water pollution prevention mailings in this reporting cycle. The Town also conducted over 35 public programs/events focusing on storm water, green homes, recycling, stainability and reusable bags.

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- D. Has your MS4 made progress toward this Measurable Goal during this reporting period?
 - Yes O No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?
- Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town plans to continue evaluating the number of direct mailings related to storm water pollution prevention as an indicator for measuring the overall effectiveness of the Town's compliance with the Public Education and Outreach program requirements in the next reporting cycle. The Town will continue to conducted public outreach, programs, meetings and events related to storm water/pollution prevention periodically throughout the next reporting period.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint rep	oort on behalf	fofac	oalit					3 ID) bl	ank	_]	
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MCM 2 Page 1 of 6

MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 3$

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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5.a. Was an Annual Report public meeting held in this reportin	g period?	Yes • No
If Yes, what was the date of the meeting?	/ /	
If No, is one planned?	C	Yes ● No
5.b. Was an Annual Report public meeting held for all MS4s co	ontributing to this rep	ort during
this reporting period?		Yes O No
If No, is one planned for each?		Yes O No
6. Were comments received during this reporting period?	0	Yes • No
If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.		

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March

9, 2 0 1 3

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7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town's Public Involvement and Participation program will incorporate stewardship activities that help to reduce pollutants of concern (i.e., pathogens and nitrogen to the local impaired waters listed in Appendix 2 of the General Permit) and encourage the general public, residents and business to become involved in storm water management and environmental stewardship events.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has chosen to evaluate the number of cleanup events as an indicator for measuring the overall effectiveness of the Town's compliance with the Public Involvement and Participation program requirements. There were eight cleanup events in this reporting cycle, including the Great East End Clean Up event. In 2012, the event had over 900 participants and collected 42 tons of garbage, 1.6 tons of metal and 65 miscellaneous items from public properties throughout the Town.

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. Has your MS4 made progress toward this measurable goal during this report	ing period?
(ex.	: samples/participants/events)

- D
 - \bigcirc No
- E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes O No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town plans to continue evaluating the number of cleanup events held within the Town as an indicator for measuring the overall effectiveness of the Town's compliance with the Public Involvement and Participation program requirements in the next reporting cycle. The Town plans to promote and encourage participation in the Great East End Cleanup and/or any other planned cleanup events in the next reporting cycle.

MCM 2 Page 6 of 6

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank,

Name of MS4/Coalition \mid Town of Southampton Y R 2 0 A Minimum Control Measure 3. Illicit Discharge Detection and Elimination The information in this section is being reported (check one): On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report? 1. Enter the number and approx. percent of outfalls mapped: 7 # 1 5 2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? 3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period? O Auto Recyclers O Landscaping (Irrigation) O Building Maintenance O Marinas Churches Metal Plateing Operations O Commercial Carwashes Outdoor Fluid Storage O Commercial Laundry/Dry Cleaners O Parking Lot Maintenance O Construction Vehicle Washouts Printing O Cross-Connections O Residential Carwashing O Distribution Centers Restaurants O Food Processing Facilities O Schools and Universities Garbage Truck Washouts O Septic Maintenance O Hospitals O Swimming Pools Improper RV Waste Disposal O Vehicle Fueling O Industrial Process Water O Vehicle Maint./Repair Shops Other: None O Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of MS4/Coalition Town of Southampton		N	Y	R	2	0	A	4	5	4

12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town Illicit Discharge Detection and Elimination program will focus on identifying, locating, eliminating, reducing and preventing illicit discharges to the maximum extent practicable, including the discharge of pathogens and nitrogen to the local impaired waters listed in Appendix 2 of the General Permit.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has chosen to evaluated the number of illicit discharges confirmed as an indicator for measuring the overall effectiveness of the Town's compliance with the Illicit Discharge Detection and Elimination program requirements. There were two illicit discharges detected in this reporting period. Both were investigated and one was confirmed to be an illicit discharge and was eliminated.

C. How many times was this observation measured or evaluated in this repo	norting period?
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samp.	les/	par	tici	oant	:s/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

● Yes ○ No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

• Yes O No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to follow the procedures for Illicit Discharge Detection and Elimination described in the Town's Written Procedures for MCM3: IDDE and the CWP/USEPA Illicit Discharge Detection and Elimination: A Guidance Manual for Program Development and Technical Assessment. Illicit discharges will be investigated and eliminated according to the authority provided by the Town illicit discharges local law on a case-by-case basis.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 3 \end{bmatrix}$

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	PD	<u> ES</u>	ID						
Name of MS4/Coalition Town of Southampton	N	Y	R	2	0	A	4	5	4

Minimum Control Measures 4 and 5. Construction Site and Post-Construction Control

	Construction Site and Post-Construction Control		
Tl	he information in this section is being reported (check one):		
	On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report?		
12	a. Has each MS4 contributing to this report adopted a law, ordinance or other reg mechanism that provides equivalent protection to the NYS SPDES General Per Stormwater Discharges from Construction Activities?	gulatory mit for • Yes	O No
11	b. Has each Town, City and/or Village contributing to this report documented that equivalent to a NYSDEC Sample Local Law for Stormwater Management and I Sediment Control through either an attorney certification or using the NYSDEC Analysis Workbook?	Erosion	w is and ONT
•	If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Lar 0 09/2004 • 03	w. 3/2006	O NT
2.	Does your MS4/Coalition have a SWPPP review procedure in place?	• Yes	○ No
3.	How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have reviewed in this reporting period?	e been	1 7
4.	Does your MS4/Coalition have a mechanism for receipt and consideration of put comments related to construction SWPPPs? • Yes	blic	O NT
	If Yes, how many public comments were received during this reporting period?		0
5.	Does your MS4/Coalition provide education and training for contractors about to SWPPP process?	the loca • Yes	l O No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

O Notices of Violation	#	O No Authority
O Stop Work Orders	#	O No Authority
O Criminal Actions	# .	O No Authority
O Termination of Contracts	#	O No Authority
O Administrative Fines	#	O No Authority
O Civil Penalties	#	O No Authority
O Administrative Orders	#	O No Authority
O Enforcement Actions or Sanctions	#	
Other	#	O No Authority

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $\begin{bmatrix} 2 & 0 & 1 & 3 \end{bmatrix}$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID
Name of MS4/Coalition Town of Southampton	N Y R 2 0 A 4 5 4
Minimum Control Measure 4. Construction Site S	Stormwater Runoff Control
The information in this section is being reported (check one):	
● On behalf of an individual MS4 ○ On behalf of a coalition How many MS4s contributed to this report?	
1. How many construction projects have been authorized for d during this reporting period?	listurbances of one acre or more
2. How many construction projects disturbing at least one acreduring this reporting period?	e were active in your jurisdiction
3. What percent of active construction sites were inspected dur	
4. What percent of active construction sites were inspected mo	
5. Do all inspectors working on behalf of the MS4s contributin Construction Stormwater Inspection Manual?	g to this report use the NYS • Yes O NO O NT
6. Does your MS4/Coalition provide public access to Stormwat (SWPPPs) of construction projects that are subject to MS4 r	eview and approval?
If your MS4 is Non-Traditional, are SWPPPs of construction public review?	● Yes ○ No ○ NT n projects made available for ○ Yes ○ No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Name of MS4/Coalition Town of Sou	hampton		N	Y	R	2	0	Α	4	5	4

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town Construction Site Storm Water Runoff Control program will provide equivalent protection to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activity. This includes reviewing SWPPPs submitted to the Town for projects disturbing an acre or greater of land. The review process will take note of any potential discharges of pathogens and nitrogen to the local impaired waters listed in Appendix 2 of the General Permit.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has chosen to evaluate the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Town's compliance with the Construction Site Storm Water Runoff Control program requirements. The Town reviewed all 17 SWPPPs submitted to the Town in this reporting period.

C.	How many	times times	was this	observation	measured o	or evalua	ated in	this	reporting	period?

	(ex.: samples/pai	ticipants/events)					
D. Has your MS4 made progress toward this measurable goal during this reporting period?							
	Yes	○ No					
E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?							

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town plans to continue evaluating the number of SWPPPs reviewed as an indicator for measuring the overall effectiveness of the Town's compliance with the Construction Site Storm Water Runoff Control program requirements. The Town will review SWPPPs for private projects as they are submitted to the Town for comment and approval.

Yes

 \bigcirc No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

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Minimum	Control Mea	sure 5. Post-	-Constructio	on Stormwat	er Managemer	<u>1t</u>
The information in	this section is bein	ng reported (chec	·k one):			
On behalf of an inOn behalf of a co	ndividual MS4 alition			_		
How	many MS4s conti	ributed to this r	eport?			
1. How many and MS4/Coalition	what type of pos inventoried, insp	t-construction s	stormwater ma tained in this re	nagement pract	tices has your ?	
		# Inventoried	#	# Times		
■ Alternative Practi	ces		Inspections	Maintained		
• Filter Systems	003					
 Infiltration Basins 		0				
Open Channels			5	5		
• Ponds				0	·	
Wetlands	•					
• Wetlands • Other						
Other		0				
2. Do you use an	electronic tool (e.g. GIS, datat	oase, spreadsh	eet) to track p	ost-construction	
Divirs, inspecti	ions and mainta	nance?			○ Yes •	No
3. What types of Development/E	non-structural p Better Site Desig	oractices have n/Green Infra	been used to i structure prin	mplement Low ciples?	Impact	
Building Codes	• Municipal Co	mprehensive Pla	ns			
Overlay Districts	Open Space P	reservation Prog	ram			
Zoning	O Local Law or	_				
○ None	● Land Use Reg	gulation/Zoning				
Watershed Plans	Other Compre	hensive Plan				

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Other:

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MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, $2 \mid 0 \mid 1 \mid 3$ If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID Town of Southampton Name of MS4/Coalition Y R 2 0 A 5 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? O Yes No 4b. Does the MS4 have a banking and credit system for stormwater management practices? O Yes No 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice? O Yes 4d. How many stormwater management practices have been implemented as part of this system in this reporting period? 0 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period? 0

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.										
		SPI	DES	ID						
Name of MS4/Coalition	Town of Southampton	N	Y	R	2	0	Α	4	5	4

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town Post-Construction Storm Water Management program will address storm water runoff from regulated (i.e., proposed land disturbances of an acre or greater) new development and redevelopment projects to the Town's municipal separate storm sewer system.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town has chosen to evaluate the number of post-construction storm water management practices inventoried as an indicator for measuring the overall effectiveness of the Town's compliance with the Post-Construction Storm Water Management program requirements. The Town has ____ post-construction storm water management practices inventoried. The Town adds BMPs to the inventory as necessary.

C.	How	many	times	was thi	is observation	n measured	or	evaluated	in	this	reporting	period?
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D. H	Has your MS4 made progress toward this measurable goal during this reporting period?	
	(ex.: samples/participan	ts/even
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E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town plans to continue evaluating the number of post-construction storm water management practices inventoried as an indicator for measuring the overall effectiveness of the Town's compliance with the Post-Construction Storm Water Management program requirements in the next reporting period. The Town will add BMPs to the inventory as necessary in the next reporting cycle.

MCM 5 Page 3 of 3

● Yes ○ No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Southampton			N Y R 2 0	A 4 5 4
Minimum Control Measure 6. Stormwate	er Man	agement fo	or Municipal	Operations
The information in this section is being reported (check o	ne):			
 On behalf of an individual MS4 On behalf of a coalition How many MS4s contributed to this report 	ort?			
1. Choose/list each municipal operation/facility the Pollutants of Concern to the MS4 system. For operation/facility has been addressed in the MS4 Program(SWMP) Plan and whether a self-assess reporting period. A self-assessment is perform potentially generated by the permittee's operate effectiveness of existing programs and 3) identitat will be addressed by the pollution prevent not done already.	each op S4's/Coassment ed to: 1 ions and tify the	eration/facilalition's Storalition's Storalition's Storalition per determine description facilities; 2 municipal o	lity indicate who mwater Manag rformed during the sources of p (2) evaluate the perations and fa	ether the gement g the pollutants
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			Operation/Activi performed within	
Operation/Activity/Facility Add	ressed i	n SWMP?	years?	
Street Maintenance			○ Yes	• No
Bridge Maintenance.	Yes	○ No	○ Yes	No
Winter Road Maintenance			• Yes	○ No
Salt Storage	A Vac	○ No	• Yes	○ No

○ No • Yes

○ No ○ Yes

○ No ○ Yes

○ No ○ Yes

○ No ○ Yes

○ No ○ Yes

○ No • Yes

○ No ○ Yes

○ No _____ • Yes

○ No ○ Yes

O No

No

No

No

No

No

O No

No

O No

No

Solid Waste Management..... • Yes

New Municipal Construction and Land Disturbance. • Yes

Right of Way Maintenance.....

Marine Operations.... • Yes

Hydrologic Habitat Modification..... • Yes

Parks and Open Space.... • Yes

Municipal Building.... • Yes

Stormwater System Maintenance..... • Yes

Vehicle and Fleet Maintenance.....

• Yes

Other..... • Yes

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDESID				
Name of MS4/Coalition Town of Southampton	N Y R 2	0 A	4	5 4	4
2. Provide the following information about municipal operat	ions good housekee	ping p	rogra	ams	;:
 Parking Lots Swept (Number of acres X Number of times swept) 	t) # Acres			2 2	2
• Streets Swept (Number of miles X Number of times swept)	# Miles		8	6 2	2
• Catch Basins Inspected and Cleaned Where Necessary	#		2	5 6	<u> </u>
 Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary 	#			ϵ	5
Phosphorus Applied In Chemical Fertilizer	# Lbs.)
Nitrogen Applied In Chemical Fertilizer	# Lbs.	1	0 :	2 0)
 Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Ni times applied to the nearest tenth.) 	# Acres [0].[0	֖֝֟֟֝֟֝֟֝֟֝֟֝֟
3. How many stormwater management trainings have been p during this reporting period?	rovided to municipa	ıl emp			Л
· · · · · · · · · · · · · · · · · · ·				1 2	
4. What was the date of the last training?	0 4 / 1 4	/ [2]	0 3	1 3	,
5. How many municipal employees have been trained in this i	reporting period?		3	3 5	
6. What percent of municipal employees in relevant positions stormwater management training?	and departments re	eceive	0 0)]%	·)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 3

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Name of MS4/Coolition Town of Southampton	SPDES ID
Name of MS4/Coalition 1 own of Southampton	N Y R 2 0 A 4 5 4
7. Evaluating Progress Toward Measurable Goals MCM 6	
Use this page to report on your progress and project plans toward a identified in your Stormwater Management Program Plan (SWMPI III.C.1. Submit additional pages as needed.	chieving measurable goals P), including requirements in Part
A. Briefly summarize the Measurable Goal identified in the SV	VMPP in this reporting period.
The Town Pollution Prevention and Good Housekeeping for Muni address operations that collect, store or release sediments, wastes of special consideration for discharges of pathogens and nitrogen to the Appendix 2 of the General Permit.	or other potential pollutants with
B. Briefly summarize the observations that indicated the overa Goal.	ll effectiveness of this Measurable
The Town has chosen to evaluate the number of miles of streets sw the overall effectiveness of the Town's compliance with the Polluti Housekeeping for Municipal Operations program requirements. The this reporting period.	on Prevention and Good
C. How many times was this observation measured or evaluate	d in this reporting period?
	1
D. Has your MS4 made progress toward this measurable goal d	(ex.: samples/participants/events. luring this reporting period? Yes
E. Is your MS4 on schedule to meet the deadline set forth in the	e SWMPP? ● Yes ○ No
F. Briefly summarize the stormwater activities planned to meet the next reporting cycle (including an implementation schedu	the goals of this MCM during
The Town plans to continue the ongoing street sweeping schedule of The Town will continue to follow the BMPs outlined in the NYSD Prevention and Good Housekeeping Assistance Document as necess	EC Municipal Pollution

MS4 Annual Report Form

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	S	PDE	SID						
Name of MS4/Coalition Town of Southampton	1	1 Y	R	2	0	Α	4	5	4

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):
On behalf of an individual MS4On behalf of a coalition
How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(POC)
NYC EOH Watershed	-	CHECKINA	(POC)
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Dii
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed	-	3,4,3,10,11,12	Phosphorus
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,86,10,11,12	Phosphorus
Greenwood Lake Watershed	-	2,5,1,5,00,10,11,12	rnosphorus
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay	-	2,5,5,05,10,11,12	Filospilotus
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary	-	2,5,1,5,54,50,10,11,12	Fathogens
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed		2,2,1,2,00,10,11,12	1 autogens and retrogen
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,86,10,11,12	Phosphorus
LI 27 Embayments	-	2,5,5,50,10,11,12	rnosphorus
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5.6.8a.8b	Pathagana
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1.	Does your MS4/Coalition have an education program addressing impacts of						
	phosphorus/nitrogen/pathogens on waterbodies?	_	O No	O N/A			

2.	Has 100% of the MS4/Coalition conveyance system been mapped in GIS?				
	If N/A, go to question 3.	s • N	0 (⊃ N /	Ά
	If No, estimate what percentage of the conveyance system has been mapped so far.				6
	Estimate what percentage was mapped in this reporting period.			= 	6

Additional BMPs Page 1 of 3

MS4 Annual Report Form

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If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

	SPDES ID	
Name of MS4/Coalition Town of Southampton	N Y R 2 0 A 4	5 4
3. Does your MS4/Coalition have a Stormwater Conveys and Maintenance Plan Program?	ance System (infrastructure) Inspe ● Yes ○ No	ection O N/A
4. Estimate the percentage of on-site wastewater treatme and maintained or rehabilitated as necessary in this r	ent systems that have been inspect reporting period?	ed 0 %
5. Has your MS4/Coalition developed a program that pr NYSDEC SPDES General Permit for Stormwater Dis (GP-0-08-001) to reduce pollutants in stormwater run disturb five thousand square feet or more?	scharges from Construction Activi	ties
6. Has your MS4/Coalition developed a program to addition runoff from new development and redevelopment protection to equal to one acre that provides equivalent protection to Permit for Stormwater Discharges from Construction the New York State Stormwater Design Manual Enha Standards?	ojects that disturb greater than or to the NYS DEC SPDES General Activities (GP-0-08-001), includin Inced Phosphorus Removal	
7a. Does your MS4/Coalition have a retrofitting program phosphorus/nitrogen/pathogen loading?		○ N/A
7b. How many projects have been sited in this reporting p	period?	3
7c. What percent of the projects included in 7b have been	completed in this reporting period	d?
7d. What percent of projects planned in previous years ha	-	0 %
Ba. Has your MS4/Coalition developed and implemented a procedures policy that addresses proper fertilizer appl lands?	lication on municipally owned	Planned N/A
Bb. Has your MS4/Coalition developed and implemented a procedures policy that addresses proper disposal of gramunicipally owned lands?	ass clippings and leaves from	● N/A

MS4 Annual Report Form

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		SPDES ID									
Name of MS4/Coalition Town of Southampton	N	Y	R	2	0	A	4 5	4			
9. Has your MS4/Coalition developed and implemented a program of native planting?											
			Ye	s	0	No	0	√A			
10. Has your MS4/Coalition enacted a local law prohibiting pet waste prohibiting goose feeding?	on 1					ope No	rties O N				
11. Does your MS4/Coalition have a pet waste bag program?		•	Ye	s	0	No	01	۱/A			
12. Does your MS4/Coalition have a program to manage goose populations?		0	Ye	s	•]	No	01	√A			